PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/541931

BASIC FEE EXAMINATION SEARCH FEE FEE FOR EXTE TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different	IAL STAGE FEES	(Col	lumn 1)		(Column 2)		TYPE		OR	SMALL	ENTITY
BASIC FEE EXAMINATION SEARCH FEE FEE FOR EXTE TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different	IAL STAGE FEES								_		
EXAMINATION SEARCH FEE FEE FOR EXTE TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different							RATE	FEE	}	RATE	FEE
SEARCH FEE FEE FOR EXTF TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different		SMALL E	ENT. = \$ 150	LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
FEE FOR EXTE TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different	EXAMINATION FEE		T Article 33(1)- \$ 50 / \$ 100		ther situations = \$ 100 / \$ 200		EXAM. FEE		1	EXAM. FEE	200
TOTAL CHARG INDEPENDENT MULTIPLE DEP * If the different	SEARCH FEE		U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	HOC
INDEPENDENT MULTIPLE DEP * If the different	FEE FOR EXTRA SPEC. PGS.		minus 100 =		/ 50 =		X \$ 125 =			X \$ 250 =	
MULTIPLE DEP * If the difference	GEABLE CLAIMS	4	minus 20 =	*			X \$ 25 =		OR	X \$ 50 =	
* If the differen	CLAIMS		minus 3 =	. –			X \$ 100 =		OR	X \$ 200 =	
<	PENDENT CLAIM PF	RESENT					+ \$ 180 =		OR	+ \$ 360 =	
<	* If the difference in column 1 is less than				olumn 2		TOTAL		OR	TOTAL	900
₹	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 3) (Column 4) (Col						SMALL E	NTITY	OR	OTHER SMALL E	
<u> </u>	REMAINING , AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total Independer	*	Minus	**	<u>.</u>	=		X \$ 25 =		OR	X \$ 50 = .	
Independer	nt *	Minus	***		=	-	-X \$ 100 =		OR	X \$ 200 =	
FIRST PR	RESENTATION OF M	AULTIPLE DE	PENDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =	
			-				TOTAL ADDIT. FEE		OR .	TOTAL ADDIT. FEE	
	(Column 1)		(Colum	ın 2)	(Column 3)						
8 7	CLAIMS REMAINING AFTER AMENDMENT	1	HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	•	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
Total Independen	nt *	Minus	***		=	ſ	X \$ 100 =		OR	X \$ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľ	+ \$ 180 =		OR	+ \$ 360 =	
· ·						.1	TOTAL ADDIT. FEE		OR T	OTAL ADDIT. FEE	
							_				

44 If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
444 If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)